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** FOREIGN AP	PLICA	\ ********************** /m \TIONS ************************************	*** 'MA ()	ED.++ SMALL F	·	/ **			
reffied and cknowledged Examiner's Signature Initials COUNTRY CA CA CA CA CA CA CA CA CA C				SHI	ETS TOTAL CLAIMS		VIS	INDEPENDENT CLAIMS 3	
ADDRESS Lawson, Philpet Suite 140		sson, P.C.							
TITLE User-specific me	ethod o	f selling products, com	outer pro	ogram product,	and s	ystem fo	or perform	ning t	he same
FILING FEE RECEIVED 618	,				☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other ☐ Credit				